## CERTIFICATE OF MAIL (37 CFR 1.8(a))

I hereby certify that this correspondence, including listed enclosures, is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Bot 1450, Alexandria, VA 22313-1450 on November 4, 2004.

Laura Lee Mosier

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

PAUL MAGLIOCCO

Serial No.: 10/039,738

Filed: January 4, 2002

For: An Apparatus Having Pattern Scrambler

For Testing A Semiconductor Device

And Method For Operating Same

Art Unit: 2114

Examiner: LE, Dieu Minh T.

Date:

November 4, 2004

## **RESPONSE TRANSMITTAL**

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is:

[X] Amendment;

[ ] a \_\_\_\_ month extension request is hereby sought;

[X] Other: Terminal Disclaimer

The fees have been calculated as shown below:

	Claims	Minus	Highest	Present	Small	OR	Other than a
	Remaining		Previously	Extra	Entity		Small Entity
	After		Paid For		Rate Fee		Rate Fee
	Amendment						
Total	23	-	23		x 9 = \$		x 18 = \$
Claims							
Indep	4	-	4		x 44= \$		x 88 = \$
Claims							
	[] Multiple De	pendent (	Claim Present	ed	+150=\$		+300 = \$
	and Fee not Previously Paid						
					TOTAL \$-0-		TOTAL \$ -0-

**Total Additional Claims Fee:** 

\$<u>-0-</u>

[]	Applicant hereby petitions for a	month Ex	month Extension of Time to respond to the						
	Official Action mailed	and includes the following fee:							
	Small Entity		Large Entity						
[]	One month \$ 55.00	[]	One month	\$110.00					
[]	Two months \$215.00	[]	Two months	\$430.00					
[]	Three months \$490.00	[]	Three months	\$980.00					
[] []	Four months \$765.00	[]	Four months	\$1,530.00					
	Five months \$1,040.00	[]	Five months	\$2,080.00					
	Extension of Time F	ee:	<u>\$ .00</u>						
[]	Fee regarding Information Disclosure Statement:								
	[] Fee Under 37 CFR 1.17(p)		\$ \$						
	[] Petition Fee Under 37 CFR	1.17(i)	\$						
	Total Information Di	sclosure Stater	ment Fee: \$ .00						
[X]	Other fees (list individually): Terminal Disclaimer Fee: \$ 55.00								
		Total Other I							
[X]	A check including the amount of the	e above indicat	ed TOTAL FEES is	attached.					
[]	Please charge Deposit Account No. 50-2319 in the amount of \$								
[]	No fee is required.								
[]	Applicant is now a SMALL / LARC	Applicant is now a SMALL / LARGE entity.							
[]	The Commissioner is hereby authorized to charge any underpayment of the fees associated with this communication under 37 C.F.R. §1.20(d), including any necessary fees for extension of time, or credit any overpayment to Deposit Account No. 50-2319 ().								
	Respectfully submitted,								
		By	N. Bachand 37,085	2					
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